DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



November 25, 2002

Dear Group Home/Foster Family Agency:

SUBJECT: FOSTER CARE GROUP HOME AND FOSTER FAMILY AGENCY (FFA) TRAINING NEEDS SURVEY

The California Department of Social Services, Foster Care Audits and Rates Branch (FCARB) has prepared a survey to help us assess the training needs of the current group home and FFA provider community.

For several years, staff from the FCARB have been providing on-site training and technical assistance to group home and FFA providers. Rate Consultants have provided technical assistance to providers at their place of business, at Community Care Licensing (CCL) orientations, and by phone. During fiscal year 1999/00, FCARB staff conducted statewide training sessions for group home providers on how to prepare for and pass a provisional rate and/or program rate audit. In 1999, FCARB staff also provided training concerning new procedures for submitting the annual financial audit reports. Subsequently, we provided additional program and financial audit workshops at both the Northern and Southern Counties Placement Committee Conferences. Staff have also provided specialized training requested by several provider association groups. The feedback received from providers and counties has indicated that the training and technical assistance is valuable to the provider community.

Due to the state's current and ongoing budget restrictions, it is unlikely that we will be able to continue to provide as much on-site technical assistance and training as in the past. However, because the FCARB continues to receive positive feedback and additional requests from providers to develop and present training, we would like to assess your needs so that we can develop alternative means of providing training and technical assistance to you. With that in mind, the FCARB has developed the enclosed Training Needs Survey, which we request you to complete so as to enable us to best assist you.

The enclosed survey has four parts. Part 1 will provide us with useful information and will help us learn about you and the previous training in which you may have participated. Although it would be helpful to know who is responding, you may remain anonymous if you wish. Part 2 will provide us with feedback using a 1 – 5 rating scale on what you found useful from previous training sessions. Part 3 will give us an idea of your ideal training/learning preferences and those areas which may be particularly difficult for you. Part 4 gives you an opportunity to let us know in your own words exactly how we can be of assistance to you in the future.

TRAINING NEEDS ASSESSMENT Page Two

We strongly urge you to take the time to complete this survey. Please ensure that it is completed by a member of your organization who possesses the best overall knowledge of your administrative training needs. We ask that the survey be completed and returned by January 1, 2003 to:

Ms. Judi Queirolo, Manager Audits Policy and Support Unit Foster Care Audits and Rates Branch 744 P Street, M.S. 19-24 Sacramento, CA 95814

You may also submit the survey by email to Ms. Queirolo at iqueirol@dss.ca.gov.

It is our goal that all group home and FFA providers are fully knowledgeable of the CDSS' administrative and record-keeping requirements. Please assist us in this endeavor by completing this survey. It will ultimately benefit you by enhancing our ability to provide you with continued quality training and technical assistance, and to prepare you for a successful financial or program audit.

If you have any questions or concerns regarding this letter or the survey, please contact Ms. Queirolo at (916) 274-0445.

Sincerely,

Original signed by Sheilah Dupuy for Judy Colbert

JUDY COLBERT, Chief Foster Care Audits and Rates Branch

Enclosure

c: Foster Care Alliance

African American Foster Parent and Group Home Association
Community Residential Care Association of Los Angeles County
Association of Minority Adolescents in Residential Care Homes of Los Angeles
County

California Alliance of Child & Family Services Association of Minority Adolescents in Residential Care Homes (AMARCH)

Training Needs Survey

Part 1 – (Enter information/check applicable items)

Prov	rider Name: (Optional)
Prog	gram No: (Optional)
RCL	(for group homes): Licensed Capacity (for group homes):
Loca	ation-Is your program in Northernor SouthernCalifornia?
Nam	ne/Title of Person Completing Survey: (Optional)
Your	Responsibilities within the Organization:
	Administration OnlyAdministration and Child Care and SupervisionAdministration and Social WorkTrainer/RecruiterBookkeeperOther (Please Identify):
1.	How long has this program been in existence?
2.	How long have you been involved with the current program?
3.	If you worked with a previous program(s), how long were you involved with the program(s) and what were your responsibilities?
4.	Have you ever received on-site technical assistance from the Foster Care Rates Bureau (FCRB)?
	Yes No

If yes, was the technical assisnot?		_
Have you ever received tech	nical assistance from the FC	CRB at a
Community Care Licensing o		
Yes No		
If yes, was the technical assistant?	•	
Have you ever attended form and Rates Branch?	al training provided by the F	oster Care Audit
Yes (Dates): No		
Did you attend one of the pre statewide training sessions p March 2, 2000?	•	
Yes No		
Did you attend one of the Fin	ancial Audit Training session	ns in 1999?
Yes No		
Do you usually attend the So Committee Conference Work		Placement
Yes (Dates): No		
Have you ever been audited	by the Foster Care Audits B	ranch?
No		
Yes Date:	Results:	Pass Fail

	If yes, what type of audit was conducted:		
	Non-Provisional Program Rate Audit Provisional Rate Audit		
Part 2	2 – (Please answer questions using a 1 – 5 rating scale)		
1 = St	rongly Agree 5 = Strongly Disagree		
	Previous training/technical assistance was useful.		
	I was able to apply the information received to the actual job.		
	Training manuals such as "50 Ways to Pass Your Audit" or "Financial Audit Guide" were/would be useful.		
	Regular (monthly or quarterly) on-line training update letters on specific subjects would be useful.		
Part 3	B – (Check the applicable items)		
1.	What is the optimal amount of time for training?		
	1 - 2 hours? 3 - 4 hours? 5 or more hours?		
2.	What is the optimal size of the training group?		
	1 – 20 trainees 21 – 40 trainees 41 or more trainees		
3.	What methods for training/learning do you prefer? (Check as many as apply)		
	Lecture Foster Care Audits Letters Handouts Internet Hands-on practice Small workshops Overheads/PowerPoint Other (Explain) Self-learning at own pace		

4.	Do you have access to the Internet for receipt of training or program updates?		
	Yes (email address): No		
5.	Would you be able to travel to Sacramento for training?		
	Yes No		
	If no, how far are you willing to travel to attend training sessions?		
	0 – 20 miles 21 – 60 miles 61 – 100 miles 101 or more miles		
6.	How valuable would it be to have joint training with Foster Care Audits, Foster Care Rates, and/or Community Care Licensing?		
	Very Valuable Moderately Valuable Not Valuable		
7.	What are the major areas of concern or misunderstanding for which you would like to have training/technical assistance?		
	Fingerprint requirements Personnel records for experience and education weightings 54-hour limitation Overtime Time records Social work qualifications Mental Health Financial record-keeping Other (Explain)		

Part 4

Audits and Rates Branch do in the future regarding training and technical assistance.	